

BAKER BOTTS LLP

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	34356PCTUSA;066031.0155
		First Named Inventor	Zvi Gubentzik
<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.15 (e)) required)		COMPLETE IF KNOWN	
		Applicant's Number	09/868,083
		Filing Date	June 14, 2001
		Group A1 Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR MEASURING NON-TRANSFERRIN BOUND IRON

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 06/14/2001

as United States Application Number or PCT International

Application Number 09/868,083

and was entered on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f) or 35(d)(1) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 35S(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also claimed below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
127621	Israel	12/17/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/026 attached hereto.

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DECLARATION -- Utility or Design Patent Application

Claim for Benefit of Prior U.S. Provisional Application(s)
 I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date

Claim for Benefit of Earlier U.S./PCT Application(s) under 35 U.S.C. 120
(complete this part only if this is a divisional, continuation or C-I-P application)
 I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

App. No./Int. No.	Filing Date	Status (patented, pending, abandoned)
PCT/IL99/00677	12/13/1999	

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Attorney Docket Number 34358PCTUSA;066031.0155

DECLARATION — Utility or Design Patent Application

Direct all correspondence to <input checked="" type="checkbox"/> Customer Number or Bar Code Label		21003		OR <input type="checkbox"/> Correspondence address below	
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the use made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of this application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name <u>Zvi</u>		Cabantchik			
(first and middle (if any))		Family Name or Surname <u>Zvi</u>			
Inventor's Signature <u>Zvi Cabantchik</u>		Date <u>Oct. 2001</u>			
Residence: City <u>Armona, Jerusalem</u>		State <u>ILX</u>		Country <u>Israel</u>	
Mailing Address <u>5 Poinil Street</u>					
City <u>Armona, Jerusalem</u>		State <u>ILX</u>		Country <u>Israel</u>	
ZIP <u>92390</u>		Country <u>Israel</u>			
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name <u>William</u>		Brugel			
(first and middle (if any))		Family Name or Surname <u>W</u>			
Inventor's Signature <u>William Brugel</u>		Date <u>Oct. 2001</u>			
Residence: City <u>Jerusalem</u>		State <u>ILX</u>		Country <u>Israel</u>	
Mailing Address <u>342 Tzur HaDassah</u>					
City <u>Jerusalem</u>		State <u>ILX</u>		Country <u>Israel</u>	
ZIP <u>99875</u>		Country <u>Israel</u>			
<input type="checkbox"/> Add done! Inventions are being named on the _____ supplemental Additional Invention(s) sheet(s) PTO/SB/USA attached hereto.					

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Please type a plus sign (+) inside this box → ☒

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page ___ of ___	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Abraham J.		Domb	
Inventor's Signature <i>Abraham J. Domb</i>		Date 30.9.2001	
Residence: City	State	Israel Country	Israel Citizenship
16 Migdal Eder Street Mailing Address			
Mailing Address			
City Efrat	State	90435 ZIP	Israel Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Alfonso		Bentolilla	
Inventor's Signature <i>Alfonso Bentolilla</i>		Date 30.9.2001	
Residence: City	State	Israel Country	Israel Citizenship
8/1 Hagall Street Mailing Address			
Mailing Address			
City Bet Shemesh	State	99582 ZIP	Israel Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country